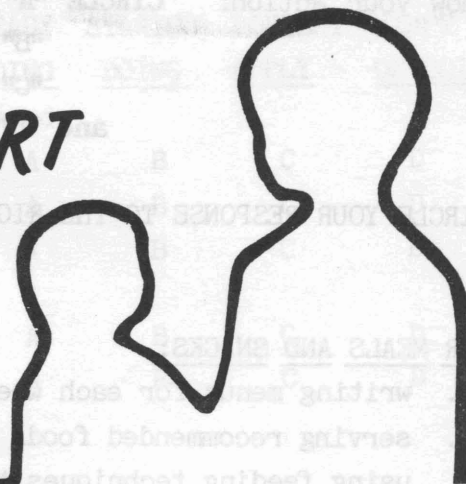


# Texas Agricultural Extension Service

*People Helping People*

## PROVIDER'S STUDY REPORT

### A Family Day Home Care Provider Program



Please estimate the amount of time you spent in studying sections in the Study Manual:  
**ON THIS SHEET: CIRCLE THE NUMBER TO THE RIGHT OF EACH ITEM WHICH BEST SHOWS YOUR ACTION.**

	15 hours or more	10-14 hours	5-9 hours	1-4 hours	didn't study
1. Time spent in Child Development/ Guidance section -	A	B	C	D	E
2. Time spent in Nutrition section -	A	B	C	D	E
3. Time spent in Health/Safety section-	A	B	C	D	E
4. Time spent in Business and Management section -	A	B	C	D	E

Please estimate the amount of time you spent in viewing videotapes in the Day Home Care program: **CIRCLE A NUMBER TO THE RIGHT OF EACH ITEM.**

	15 hours or more	10-14 hours	5-9 hours	1-4 hours	didn't study
5. Hours spent viewing Child Development/Guidance videos -	A	B	C	D	E
6. Hours spent viewing Nutrition videos -	A	B	C	D	E
7. Hours spent viewing Health/Safety videos -	A	B	C	D	E
8. Hours spent viewing Business and Management videos -	A	B	C	D	E

Now that you have studied the Child Day Care resources, please indicate what action you've taken, if any, for each of the listed practices, using the following codes to show your action: **CIRCLE "A" if you were already doing the practice,**  
**"B" if you have now started doing it,**  
**"C" if the practice doesn't apply to your situation,**  
**and "D" if you do not plan to use this practice.**

CIRCLE YOUR RESPONSE TO THE RIGHT OF EACH ITEM.

	ALREADY DOING	STARTED DOING	DOESN'T APPLY	DON'T PLAN ON DOING
<u>FOR MEALS AND SNACKS:</u>				
9. writing menus for each week	A	B	C	D
10. serving recommended foods in each food group	A	B	C	D
11. using feeding techniques that encourage emotional and physical development	A	B	C	D
12. recognizing when children have eaten enough	A	B	C	D
13. cleaning the kitchen surfaces	A	B	C	D
<u>FOR GUIDING CHILDREN'S GROWTH:</u>				
14. providing materials & space for creative play	A	B	C	D
15. having rules and routines about behavior that children, parents and provider all know	A	B	C	D
16. talking with parents about child's behavior-- positive and problem situations	A	B	C	D
17. using positive discipline to direct a child's behavior	A	B	C	D
18. providing space for both noisy and quiet play	A	B	C	D
<u>FOR HEALTH AND SAFETY:</u>				
19. posting emergency phone numbers near the phone	A	B	C	D
20. child-proofing the home by removing hazards from the yard and home	A	B	C	D
21. checking child for signs of illness before the parents leave	A	B	C	D
22. planning and practicing what to do in an emergency (such as a HELP poster)	A	B	C	D
23. assembling a basic first aid kit	A	B	C	D

CIRCLE "A" if you were already doing the practice, "B" if you have started doing it, "C" if the practice doesn't apply to your situation, and "D" if you do not plan to use this practice.

FOR BUSINESS AND MANAGEMENT:	ALREADY	STARTED	DOESN'T	DON'T PLAN
	<u>DOING</u>	<u>DOING</u>	<u>APPLY</u>	<u>ON DOING</u>
24. reviewing financial records to see if you have earned enough to cover costs and compensate for efforts	A	B	C	D
25. keeping receipts of tax deductible expenses	A	B	C	D
26. using contract and policy statement with parents	A	B	C	D
27. keeping a record for each child (with medical, attendance, signs of progress or problems)	A	B	C	D
28. developing a network with other providers	A	B	C	D

It will be helpful for Extension to have general information about the people who take part in this study program. This information will not be identified in any way with you individually or by name.

29. How long have you cared for children as a business/occupation? \_\_\_\_\_ years
30. What was your main reason for participating in this study program? (Circle ONE)
- A More effective management of my responsibilities.
  - B Improved status as a child care provider.
  - C Parents' recognize my commitment to quality child care.
  - D Personal and professional improvement.
31. For Extension reporting purposes only, please circle the letter of the racial or ethnic group below with which you identify yourself?
- A American Indian
  - B Asian
  - C Black
  - D Hispanic
  - E White
32. Apart from this study course, have you ever received information from an Extension agent or taken part in an Extension educational activity?
- A No
  - B Yes
  - C Don't know

PLEASE FINISH ON BACK PAGE



33. Add any other comments you care to make about this course

(its materials, content and procedures, for example):

ON THE ATTACHED CARD, PLEASE PRINT YOUR NAME AS YOU WANT IT  
TO APPEAR ON THE COURSE CERTIFICATE. THANK YOU!!

NOW TURN IN ALL THE MATERIALS.